

OCT 27 2006

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**FACSIMILE COVER LETTER**

**To:** Commissioner for Patents  
Examiner Cindy Nguyen

**Firm:** U.S. Patent and Trademark Office  
Art Unit 2161

**Facsimile:** (571) 273-8300

**From:** Thomas F. Presson

**Date:** October 27, 2006

**Re:** FLH Ref No.: 450100-04665  
Serial No: 10/625,106

**Number of Pages:** 22  
(including cover page)

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450100-04665

OCT 27 2006

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants : Tetsujiro Kondo, et al.  
Serial No. : 10/625,106  
Filed : July 22, 2003  
For : CONTROL SYSTEM, CONTROL APPARATUS, CONTROL METHOD, STORAGE MEDIUM, AND PROGRAM  
Examiner : Nguyen, Cindy  
Art Unit : 2161

745 Fifth Avenue  
New York, NY 10151  
Tel: 212-588-0800

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below.  
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

**Claims as Amended**

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Percent extra	(6) Rate	(7) Additional Fee
Total claims	23	Minus	** = 23	* 0 x	\$50 (25)	= \$ 0
Independent claims	13	Minus	** = 13	* 0 x	\$200 (100)	= \$ 0
Total additional fee for this amendment						\$ 0

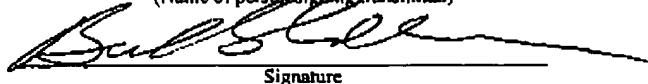
- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.  
\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the first month following the expiration of the term originally set therefor. This is a petition to request a one-month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$120.00 is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

**CERTIFICATE OF FACSIMILE**

I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on October 27, 2006.

Barnet Shindlman  
(Name of person signing transmittal)



Signature

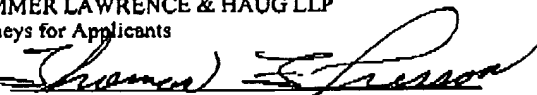
October 27, 2006

Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP  
Attorneys for Applicants

By:

  
Thomas F. Presson  
Reg. No. 41,442

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